HEARTLAND HEALTH CARE CENTER-PLATTEVILLE

1300 NORTH WATER STREET

PLATTEVILLE 53818	Phone: (608) 388-2453		Ownership:	Corporation
Operated from 1/1 To 1	2/31 Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjunction w	ith Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up an	d Staffed (12/31/03):	99	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capac	ity (12/31/03):	99	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 1	2/31/03:	83	Average Daily Census:	89

Services Provided to Non-Residents		Age, Gender, and Primary Di	Length of Stay (12/31/03)					
				Age Groups	ફ		10.8	
Supp. Home Care-Personal Care	No			ı		1 - 4 Years	39.8	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	4.8		38.6	
Day Services No		Mental Illness (Org./Psy)	33.7	65 - 74	8.4			
Respite Care	Yes	Mental Illness (Other)	3.6	75 - 84	30.1		89.2	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	44.6	*********	*****	
Adult Day Health Care No		Para-, Quadra-, Hemiplegic	1.2	95 & Over	12.0	Full-Time Equivalent		
Congregate Meals No		Cancer	3.6			Nursing Staff per 100 Residents		
Home Delivered Meals No		Fractures	2.4		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	8.4	65 & Over	95.2			
Transportation	No	Cerebrovascular	14.5			RNs	7.3	
Referral Service	No	Diabetes	6.0	Gender	용	LPNs	11.2	
Other Services	No	Respiratory	3.6			Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	22.9	Male	21.7	Aides, & Orderlies	43.4	
Mentally Ill	No			Female	78.3	I		
Provide Day Programming for			100.0			1		
Developmentally Disabled	No			l	100.0	I		

Method of Reimbursement

	Medicare Medicaid (Title 18) (Title 19)		Private Other Pay				Family Care			Managed Care										
Level of Care	No.	%	Per Diem (\$)	No.	୧	Per Diem (\$)	No.	90	Per Diem (\$)	No.	엉	Per Diem (\$)	No.	용	Per Diem (\$)	No.	୍ବ	Per Diem (\$)	Total Residents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	6	100.0	329	50	96.2	98	1	100.0	97	24	100.0	148	0	0.0	0	0	0.0	0	81	97.6
Intermediate				2	3.8	83	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	2.4
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	6	100.0		52	100.0		1	100.0		2.4	100.0		0	0.0		0	0.0		8.3	100.0

HEARTLAND HEALTH CARE CENTER-PLATTEVILLE

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12/	/31/03
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	8	As	ssistance of	% Totally	Number of
Private Home/No Home Health	16.3	Daily Living (ADL)	Independent	One	e Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	2.4		74.7	22.9	83
Other Nursing Homes	5.0	Dressing	9.6		80.7	9.6	83
Acute Care Hospitals	67.5	Transferring	27.7		59.0	13.3	83
Psych. HospMR/DD Facilities	7.5	Toilet Use	22.9		62.7	14.5	83
Rehabilitation Hospitals	0.0	Eating	47.0		44.6	8.4	83
Other Locations	3.8	*****	******	*****	******	******	*****
Total Number of Admissions	80	Continence		용	Special Treatmen	ts	용
Percent Discharges To:		Indwelling Or Extern	nal Catheter	4.8	Receiving Resp	iratory Care	4.8
Private Home/No Home Health	11.0	Occ/Freq. Incontiner	nt of Bladder	60.2	Receiving Trac	· · · · · · · · · · · · · · · · · · ·	0.0
Private Home/With Home Health	34.1	Occ/Freq. Incontiner	nt of Bowel	30.1	Receiving Suct	ioning	0.0
Other Nursing Homes	4.4	i I			Receiving Osto		0.0
Acute Care Hospitals	12.1	Mobility			Receiving Tube	Feeding	2.4
Psych. HospMR/DD Facilities	1.1	Physically Restraine	ed	0.0	Receiving Mech	anically Altered Diets	7.2
Rehabilitation Hospitals	2.2				3	-	
<u> </u>	4.4	•			Other Resident C	haracteristics	
Deaths	30.8	With Pressure Sores		3.6	Have Advance D	irectives	9.6
Total Number of Discharges		With Rashes		3.6			
(Including Deaths)	91			- • •	Receiving Psyc	hoactive Drugs	57.8

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

		Owne	ership:	Bed	Size:	Lic	ensure:			
	This	Pro	Proprietary Peer Group % Ratio		-99	Ski	lled	Al	1	
	Facility	Peer			Group	Peer Group		Faci	lities	
	용	૪			Ratio	%	Ratio	8	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	89.9	84.6	1.06	88.0	1.02	88.1	1.02	87.4	1.03	
Current Residents from In-County	75.9	75.5	1.00	72.9	1.04	69.7	1.09	76.7	0.99	
Admissions from In-County, Still Residing	18.8	18.9	0.99	20.1	0.93	21.4	0.87	19.6	0.95	
Admissions/Average Daily Census	89.9	152.9	0.59	129.5	0.69	109.6	0.82	141.3	0.64	
Discharges/Average Daily Census	102.2	154.8	0.66	130.3	0.78	111.3	0.92	142.5	0.72	
Discharges To Private Residence/Average Daily Census	46.1	63.8	0.72	52.2	0.88	42.9	1.07	61.6	0.75	
Residents Receiving Skilled Care	97.6	94.6	1.03	93.7	1.04	92.4	1.06	88.1	1.11	
Residents Aged 65 and Older	95.2	93.7	1.02	94.2	1.01	93.1	1.02	87.8	1.08	
Title 19 (Medicaid) Funded Residents	62.7	66.0	0.95	66.3	0.94	68.8	0.91	65.9	0.95	
Private Pay Funded Residents	28.9	19.0	1.52	21.6	1.34	20.5	1.41	21.0	1.38	
Developmentally Disabled Residents	0.0	0.5	0.00	0.5	0.00	0.5	0.00	6.5	0.00	
Mentally Ill Residents	37.3	31.3	1.19	36.2	1.03	38.2	0.98	33.6	1.11	
General Medical Service Residents	22.9	23.7	0.96	21.5	1.07	21.9	1.05	20.6	1.11	
Impaired ADL (Mean)	46.3	48.4	0.96	48.4	0.96	48.0	0.96	49.4	0.94	
Psychological Problems	57.8	50.1	1.15	53.4	1.08	54.9	1.05	57.4	1.01	
Nursing Care Required (Mean)	2.7	6.6	0.41	6.9	0.39	7.3	0.37	7.3	0.37	